

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF Jerome Allen James	COURT CASE NUMBER 08C1019
DEFENDANT Michael Sheahan	TYPE OF PROCESS S/C
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Brian Ruzanski, Correctional Officer, Division 5, 3 to 11 shift ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) CCJ, C/O Legal Dept. 2700 S. California Ave., 2nd. Flr., Div. 5, Chicago, IL 60608	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Jerome Allen James, B-68976
Stateville-STV
P.O. Box 112
Joliet, IL 60434

Number of process to be served with this Form - 285	1
Number of parties to be served in this case	11
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold**FILED****APR 22 2008 PH**MICHAEL W. DOBBINS **APR 22 2008**
CLERK, U.S. DISTRICT COURT

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

04-02-08**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 11 of 11	District of Origin 24	District to Serve 24	Signature of Authorized USMS Deputy or Clerk	Td	Date 04-02-08
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I hereby certify and return that ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

RONNY FERNANDEZ, LEGAL OFFICER

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service Time am

4/16/08 1:30 pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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One Service fee charged same case + 10 detention
1 DUSM, 1 Hour, 16 MILES See process sheet #2 for charges